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DECLARATION
AND POWER OF ATTORNEY
U.S.A.

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ATTORNEYS' DOC #27 NO.

ALL PATENTS, INCLUDING DESIGN
FOR APPLICATION BASED ON PCT, PARIS CONVENTION,
NON PRIORITY, OR PROVISIONAL APPLICATIONS

As a below named inventor, I declare that my residence, last office address and citizenship are stated below next to my name, the information given herein is true, that I believe that I am the original, first and sole inventor (if only one name is listed at 201 below), or an original, first and joint inventor (if plural inventors are named below at 201-203, or on additional sheets attached hereto) of the subject matter which is claimed and for which patent is sought on the invention entitled:

Optical Assembly and Method for Detection of Light Transmission

the specification of which:

☐ is attached hereto OR

☒ was filed on 15/08/2003

Application Serial No.

PCT/G803/003591

and was amended on

as United States Application Number of PCT International

(if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendments referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56, including for continuation-in-part applications, material information which becomes available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under Title 35, United States Code, §118 (a)-(c) or (f), or 352(b) of any foreign application(s) for patent or inventors or plant breeder's rights certificate, or application for patent or plant breeder's rights certificate(s) having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

0218248.2

GB

17/08/2002

Priority Claimed

(Number)

(Country)

(Day/Month/Year Filed)

☒ Yes ☐ No

(Number)

(Country)

(Day/Month/Year Filed)

☐ Yes ☐ No

(Number)

(Country)

(Day/Month/Year Filed)

☐ Yes ☐ No

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below:

Application No.

Filing Date

Application No.

Filing Date

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)

(Filing Date)

(Status: patented, pending, abandoned)

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney (Registration No. 1) to prosecute this application, receive and act on communications from my agent, and transmit all business in the Patent and Trademark Office connected therewith. HARVEY B. JACOBSON, JR. (20,881); JOHN CLARKE HOLMAN (22,789); ALLEN S. WELSER (27,315); MICHAEL R. SLOBASKY (26,421); JONATHAN L. SCHERER (28,851); IRWIN M. ALBENBERG (18,007); WILLIAM E. FLAYER (31,408); YOON S. HAM (45,307); LINDA J. SHAPIRO (28,284); SUZIN C. BAILEY (42,489); SUZANNAH K. SUNG (43,172); MARVIN R. STERN (20,840); AND NATHANIEL A. HUMPHRIES (22,772)

SEND CORRESPONDENCE TO: CUSTOMER NO. 00138

JACOBSON HOLMAN
PROFESSIONAL LIMITED LIABILITY COMPANY
400 SEVENTH STREET, N.W.
WASHINGTON, D.C. 20004

DIRECT TELEPHONE CALLS TO:
(please use Attorney's Direct No.: (202) 438-8888)

JACOBSON HOLMAN
PROFESSIONAL LIMITED LIABILITY COMPANY

Inventor(s) name must include at least one unabbreviated first or middle name.

	FULL NAME * OF INVENTOR	FAMILY NAME	GIVEN NAME	MIDDLE NAME
201	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY
				ZIP CODE
202	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY
				ZIP CODE
203	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY
				ZIP CODE

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like crimes are punishable by fine or imprisonment or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201*	SIGNATURE OF INVENTOR 202*	SIGNATURE OF INVENTOR 203*
DATE	DATE	DATE

* Additional inventors are named on separately numbered sheets attached hereto
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**JACOBSON HOLMAN PLLC
ADDITIONAL INVENTORS**

*Inventor's name must include at least one unabbreviated first or middle name.

204	FULL NAME OF INVENTOR	FAMILY NAME	GIVEN NAME	MIDDLE NAME	COUNTRY OF CITIZENSHIP	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY			
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY		ZIP CODE
205	FULL NAME OF INVENTOR	FAMILY NAME	GIVEN NAME	MIDDLE NAME	COUNTRY OF CITIZENSHIP	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY			
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY		ZIP CODE
206	FULL NAME OF INVENTOR	FAMILY NAME	GIVEN NAME	MIDDLE NAME	COUNTRY OF CITIZENSHIP	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY			
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY		ZIP CODE
207	FULL NAME OF INVENTOR	FAMILY NAME	GIVEN NAME	MIDDLE NAME	COUNTRY OF CITIZENSHIP	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY			
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY		ZIP CODE
208	FULL NAME OF INVENTOR	FAMILY NAME	GIVEN NAME	MIDDLE NAME	COUNTRY OF CITIZENSHIP	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY			
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY		ZIP CODE
209	FULL NAME OF INVENTOR	FAMILY NAME	GIVEN NAME	MIDDLE NAME	COUNTRY OF CITIZENSHIP	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY			
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY		ZIP CODE
210	FULL NAME OF INVENTOR	FAMILY NAME	GIVEN NAME	MIDDLE NAME	COUNTRY OF CITIZENSHIP	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY			
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY		ZIP CODE
211	FULL NAME OF INVENTOR	FAMILY NAME	GIVEN NAME	MIDDLE NAME	COUNTRY OF CITIZENSHIP	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY			
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY		ZIP CODE

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under section 1001 of Title 18 of the United States Code; and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 204 *	SIGNATURE OF INVENTOR 205 *	SIGNATURE OF INVENTOR 206 *
DATE 104 FEB 2005	DATE	DATE
SIGNATURE OF INVENTOR 207 *	SIGNATURE OF INVENTOR 208 *	SIGNATURE OF INVENTOR 209 *
DATE	DATE	DATE
SIGNATURE OF INVENTOR 210 *	SIGNATURE OF INVENTOR 211 *	
DATE	DATE	

☐ Additional inventors are named on separately numbered sheets attached hereto.

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Law Offices of
JACOBSON HOLMAN
PROFESSIONAL LIMITED LIABILITY COMPANY
400 SEVENTH STREET, N.W.
WASHINGTON, D.C. 20004

Attorney's Docket No. _____

SMALL ENTITY DECLARATION
[37 CFR 1.27(a)(1)-(3)]

Each undersigned declares that:

- (1) ☒ the application attached hereto.
- (2) ☐ U.S. Application Serial No. _____, filed _____
- (3) ☐ U.S. Patent No. _____, issued _____
- is entitled to the benefits of "small entity" status for paying reduced fees under 35 U.S.C. 41(a) and (b) to the Patent and Trademark Office by virtue of the following:
- (4) ☐ Each undersigned declares that he/she qualifies as an independent inventor, or would qualify had he/she made the invention, as defined in 37 CFR 1.27(a)(1).
- (5) ☒ The undersigned declares that he/she is an official empowered to act on behalf of the concern identified below; that this concern qualifies as a small business concern as defined in 37 CFR 1.27(a)(2); that exclusive rights to the invention have been conveyed to and remain with the small business concern, or if the rights are not exclusive, that all other rights belong to small entities as defined in 37 CFR 1.27(a).
- (6) ☐ The undersigned declares that he/she is an official empowered to act on behalf of the organization identified below; that this organization qualifies as a nonprofit organization as defined in _____
- (a) ☐ 37 CFR 1.27(a)(3)(i) and (ii)(A)
- (b) ☐ 37 CFR 1.27(a)(3)(i) and (ii)(B)
- (c) ☐ 37 CFR 1.27(a)(3)(i) and (ii)(C) State law of _____
- (d) ☐ 37 CFR 1.27(a)(3)(i) and (ii)(D); and
- that exclusive rights to the invention have been conveyed to and remain with the organization, or if the rights are not exclusive, that all other rights belong to organizations as defined in 37 CFR 1.27(a).
- (7) Each person, concern or organization to which I/we have assigned, granted, conveyed or licensed, or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:
- (a) ☒ no such person, concern or organization
- (b) ☐ persons, concerns or organizations listed below
(a separate declaration is required from each named person, concern or organization having rights to this invention availing to their status as "small entities.")

Full Name _____

Address _____

☐ Individual

☐ Small Business Concern

☐ Nonprofit Organization

I/we acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement of small entity prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I/we hereby declare that all statements made herein of his/her own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application, any patent issued thereon, or any patent to which this declaration is directed.

(8) _____	_____	_____
Typed Name of Inventor	Signature	Date
_____	_____	_____
Typed Name of Inventor	Signature	Date
_____	_____	_____
Typed Name of Inventor	Signature	Date
_____	_____	_____
Typed Name of Inventor	Signature	Date

(9) Paraytec Ltd

Name of Small Business Concern or Nonprofit Organization	By _____	_____
David M GOODALL	Signature	Date
Typed Name	_____	_____
Director	_____	_____
Title of Signatory	_____	_____

CPA 4/2003

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